## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Our Principles PAC	
	C C00603621
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Campaign Solutions	M M / D D / Y Y Y
Mailing Address 117 N. St. Asaph Street	01 31 2016 Amount
City State Zip Code	2800.00
Alexandria VA 22314	Transaction ID : SE.4273 Date of Disbursement or Obligation
Purpose of Expenditure Voter contact-email  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Donald J. Trump Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought  Disbut	
	Other (specify) -
Full Name of Payee Resurgent Media	Date of Public Distribution/Dissemination  O2  O1  O2  O1  O2  O1  O2  O3  O3  O4  O4  O5  O5  O5  O5  O5  O5  O5  O5
Mailing Address 736 Waverly Point	02 01 2016
The state of the s	Amount
City State Zip Code	7500.00
Macon GA 31210	Transaction ID : SE.4277
Purpose of Expenditure  Adverticing  Category/	Date of Disbursement or Obligation
Advertising Type	
Name of Federal Candidate Support Offic	e Sought: House District:
Donald I Trump	President Senate State: NH
	ursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought 530569.36 Disb 2016	
(a) SUBTOTAL of Itemized Independent Expenditures	10300.00
(a) SSE TO THE OF HOME EXPONENTIAL EXPONEN	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Jamie Jodoin	M / D D / Y Y Y Y
[Electronically Filed] Date	01 2016
Signature	